



## CREATION STATION

58915 S.R. 15

**Goshen, IN 46528**

574-533-1121

Fax: 574-533-1122

### Registration

We are currently accepting students for the 2009-2010 school year. Registration is on a first-come, first-serve basis. A \$30.00 registration fee **MUST** accompany your registration.

Jefferson Brethren Preschool is a school in Christian living. Our curriculum emphasizes Christian values through Bible teachings. As your child learns to respond through sharing and group play, he/she is learning to model Christian ideals. Because each child is a unique creation, we strive to foster individuality in an atmosphere of discovery, confidence, and self-worth.

Our overall goal for our preschool is to provide a motivated learning atmosphere that emphasizes Christian living through social play in the areas of sharing, self-esteem and motor skills.

Our curriculum promotes social development, large/small motor skills, music, Bible teachings, Math, Science, pre-reading, life skills, creative expression, and hands on learning.

Ages 3 – 4 may attend class on Tuesday and Thursday from 9:00 AM – 11:00 AM. There are two classes available for ages 4 - 5 on Monday, Wednesday, and Friday from 8:30 AM – 11:00 AM, 9:30 AM – 12:00 PM. Your child must be able to use restroom facilities without assistance and be current with all shots. Your child must be 3 or 4 years of age by September 1, 2009.

Please return the registration form and fee (checks made payable to Jefferson Brethren Preschool) to the church office in person or by mail. If you do not hear from the preschool, your child will be enrolled in the requested class. You may contact Pam Garber, Children's Director, during regular office hours if you have any questions.

Jefferson Brethren Church Office Hours:

Monday – Thursday, 8:30 AM – 3:30 PM, (Closed for lunch 12 N – 1 PM)

Friday, 8:30 AM – 12 N

FOR OFFICE USE ONLY  
Date Received \_\_\_\_\_  
Payment Received \_\_\_\_\_  
Check # \_\_\_\_\_ Cash

## Jefferson Brethren Preschool Registration Form

Note: Children must be 3 or 4 years of age by September 1, 2009  
**Your child must be able to use restroom facilities without assistance**

I would like to enroll my child in (check one):

\_\_\_\_ **AM Preschool**  
Ages 3 – 4  
Tue/Thurs  
9:00 – 11:00 AM  
\$60.00

\_\_\_\_ **AM Pre-K**  
Ages 4 – 5  
Mon/Wed/Fri  
8:30 – 11:00 AM  
\$85.00

\_\_\_\_ **AM Pre-K**  
Ages 4 – 5  
Mon/Wed/Fri  
9:30 – 12:00 PM  
\$85.00

CHILD'S Name \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

Name by which child prefers to be called \_\_\_\_\_

AGE \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

Parent's Names \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Father's Employer \_\_\_\_\_ Phone Number \_\_\_\_\_

Mother's Employer \_\_\_\_\_ Phone Number \_\_\_\_\_

Names and Ages of other children in the family \_\_\_\_\_

Name of church where your family attends \_\_\_\_\_

Daytime Caregiver Name \_\_\_\_\_ Phone Number \_\_\_\_\_

### EMERGENCY PHONE NUMBERS

Please list two people we can contact in case parents are unable to be reached

Name/Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name/Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

**If you do not hear from the preschool, your child will be enrolled in the requested class.**

**Please return this form, along with a \$30.00 non-refundable registration fee, to:**

Jefferson Brethren Preschool  
58915 SR 15  
Goshen, IN 46528  
(574) 533-1121 Fax (574) 533-1122